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UTILITY **PATENT APPLICATION TRANSMITTAL**

nonnmuisional anniication under

Signature

Attorney Docket No.: First Named Inventor:

Title:

380-117 **JOY MANGANO**

NAIL POLISHING STAND AND STORAGE CABIN

37 CFR 1.53(b) Express Mail Label I				No.:	No.: EV 171218556 US							
APPLICATION ELEMENTS See MPEP chapter 6000 concerning design patent application contents					ADI	ADDRESS TO: Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450						
1.	Ø	Fee Trans (submit an oi	mittal Form (e.g. PTC riginal, and a duplicate for	D/SB/17) fee processing)		7.		CD-ROM or CD-F Computer Progra	R in duplic m (Apper	cate, la	arge table or	
2. [333 31 31 11 11=1			8.		Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)						
3. Specification [Total Pages 14] (preferred arrangement set forth below, MPEP 1503.01) - Descriptive Title of the Invention - Cross References to Related Applications - Statement Regarding Fed sponsored R&D - Reference to sequence listing, a table, or a							a. ☐ Computer I b. Specification S I. ☐ CD-RC ii. ☐ paper c. ☐ Statements	Form Listing -R (2 d	(CRF) g on copies or			
		- Backgrou	omputer program listing appendix ackground of the Invention ief Summary of the Invention			1_	A	ON PARTS				
	- Brief Description of the Drawings (if filed) - Detailed Description - Claim(s) - Abstract of the Disclosure Drawings(s) (37 CFR 1.152) [Total Sheet]			(if filed)		9. 10.		Assignment Papers (cover sheet & d 37 CFR 3.73(b) Statement Pow (when there is an assignee)			Power of	
4. [otal Sheets 91	11.		English Translation			Attorney f applicable)		
	_	Oath or De	eclaration [To	otal Pages <u>2</u>]		12.		Information Disclostatement (IDS)	sure	ع 🗆 و	Copies of IDS Citations	
	 a. ☑ Newly executed (original or copy) b. ☐ Copy from a prior application (37 CFR a. ☐ DELETION OF INVENTOR(S) 			on (37 CFR 1.63 ITOR(S)	CFR 1.63(d))	13. 14.		Preliminary Amend	dment			
		Signed statement attached deleting inventor(s) named in the prior appl., see 37 CFR 1.63(d)(2) and 1.33(b)			see	15.		Certified Copy of (if foreign priority is cl	Priority D	ocume	ent(s)	
6. [37 CFR 1.63(d)(2) and 1.3 ☐ Application Data Sheet. See 37 C				16.		Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i).Applicant must attach form PTO/SB/35 or its equivalent.					
				17.	×							
			ING APPLICATION, an Application Data Shee			, and su	oply t	he requisite information	n below and	in a pre	eliminary	
	Cor	ntinuation	☐ Divisional	□ Co	ntinu	ation-ii	1-ра	rt (CIP) of prio	r applicat	ion No)	
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under l	Box	5b, is conside	ered a part of the disclosuration can only be relied up	re of the accomp	anyin	a continu	ation	or divisional application	n and is he	reby inc	orporated by	
				19. CORRE	SPO	NDEN	CE A	ADDRESS				
	☐ Customer Number or Bar Code Label (Insert Customer No. or Attach bar code label here) or ☑ Correspondence address below											
Name Galgano & Burke												
Address 300 Rabro Drive, Suite 35												
City H			Hauppauge		State		New York		Zip Code		11788	
Country USA Telepi		phone	6	631-582-6161	Fax		631-582-6191					
Name (Print/Type) Thomas M. Galgano R					Regis	Registration No. (Attorney/Agent) 27,638						

Signature

Date November 14, 2003

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Date

PTO/SB/17 (01-03)
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FEE TRANSMITTAL FOR FY 2003

Effective 01/01/200. Patent fees are subject to annual revision

Applicant claims small entity status.

See 37 CFR1.27

TOTAL AMOUNT OF PAYMENT (\$) 852.00 Application Number:

Filing Date:

First Named Inventor: Examiner Name: Group Art Unit: Attomey Docket No.:

JOY MANGANO

380-117

METHOD OF PAYMENT (check all that apply)	FEE CALCULATION (continued)								
□Check ⊠Credit □Money □Other □None Card Order		ADDI	TION	AL FE	ES				
□ Deposit Account: □ Deposit Account Number: 07-0130 □ Deposit Account Name: Galgano & Burke □ The Commissioner is authorized to: (check all that apply) □ Charge fee(s) indicated below □ Credit any overpayments		Entity	Small	Entity					
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Charge any additional fee(s) during the pendency of this application except for issue fee	1052	50	2052	25	or cover sheet	rovisional filing fee			
☐ Charge fee(s) indicated below, except for filing fee to the above-identified deposit account.	1053 1805	130 2520	1053 1812	130 2520		on-English specification or filing a request for <i>ex parte</i> eexamination			
FEE CALCULATION 1. BASIC FILING FEE	1804	920*	1804	920*	Requesting public to Examiner action				
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2. EXTRA CLAIMS FEES FOR UTILITY & REISSUE Extra Fee from Fee		110 1300	2452 2453	55 650	proceeding Petition to revive Petition to revive				
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1201 84 2201 42 Independent claims in excess of 3 1203 280 2203 140 Multiple dependent claim,	1801 1802	750 900	2801 1802	375 900		nued Examination (RCE	<u> </u>		
if not paid 1204 84 2204 42 **Reissue independent claims over original patent 1205 18 2205 9 **Reissue claims in excess of of 20 and over original patent					Request for expedited examination of a design application dal of Assignment				
SUBTOTAL (2) (\$) \$42.00 **or number previously paid, if greater, For Reissues, see above	SUBTOTAL (3) (\$)_40.00* *Reduced by Basic Filing Fee Paid								
SUBMITTED BY						COMPLETE (if appli	cable)		
Name (Print/Type) Thomas M. Galgano	Registrati n No. 27,638				638	Telephon: 631-582-6161			
Signature Ma MA						Date November 1	4, 2003		